

UNIFORM MORTGAGE BRANCH OFFICE FORM

FORM MU3 INSTRUCTIONS

A. GENERAL INSTRUCTIONS

1. **FILING** – Form MU3 is the Branch Office form accompanying the Form MU1-Uniform Mortgage Lender/Mortgage Broker form. An *applicant* for a Mortgage Lender or a Mortgage Broker license may apply for a branch office to *jurisdiction(s)* that have adopted the uniform Form MU3. The *applicant* must also refer to each *jurisdiction* in which it is applying for *jurisdiction*-specific requirements relating to branch offices.
2. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
3. **EXECUTION** – The execution section must be completed by an authorized representative of the *applicant* (corporate officer, partner, member, sole proprietor, etc).
4. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The effective date is the date *applicant* would like this license/registration or amendment to become effective. Consult applicable *jurisdiction* for effective date expectations. *Idaho anticipates 30-60 days from receipt of a **complete** (not partially filed) application.*
5. **AMENDMENTS** – The *applicant* must update information about a branch office, as required in each applicable *jurisdiction*, by submitting amendments using Form MU3. When filing an amendment, check the “amendment” box on line 1, provide the *applicant* name, filing and effective dates, and complete only the information that is being amended in item(s) 2a through 6a or 7 through 14. Consult each *jurisdiction* concerning the return of the prior original license/registration document when submitting the amended Form MU3.
6. **CONTACT EMPLOYEE** – The individual listed on the *applicant's* Form MU1 (company's main office) as the contact employee will be contacted by *jurisdiction(s)* if needed, about this branch form MU3.
7. **SURRENDER / CLOSE**– When an *applicant* decides to cease operations under the license/registration, at one or more branches, use the Form MU3 to notify *jurisdiction(s)* by checking the “surrender” box and completing only items 2, and 7. Send the original license/registration document (if any was issued) to the *jurisdiction(s)* along with the Form MU3 to surrender. Use the Form MU1 to notify *jurisdiction(s)* if the entire company will cease operations under the license/registration. Consult each *jurisdiction* concerning additional specific requirements at closure.

B. FILING INSTRUCTIONS

1. FORMAT

- A. Form MU3 may accompany a new company filing on Form MU1, or may follow the Form MU1 later. A fully completed Form MU3 must be submitted to each applicable *jurisdiction* when the *applicant* is filing for branch authorization the first time. The *applicant* should contact the appropriate *jurisdiction(s)* for specific branch filing requirements, including applicable fees.
- B. The Execution section must include notarized original manual signature for the initial Form MU3 filing for each branch office.
- C. Type all information.
- D. Use only the current version of Form MU3 or a reproduction of it.

2. ATTACHMENTS

- A. File a Form MU2 for each branch manager identified in item 6.
 - B. Some *jurisdiction(s)* require separate filings for use of fictitious name/trade name/doing business as name(s) as seen in item 5. Consult the *jurisdiction(s)* to determine such requirements, and attach a copy of such filing if required by that *jurisdiction*. *Refer to Idaho Addendum for branch applications.*
 - C. Depending on the *jurisdiction*, individual(s) originating mortgage loans at the branch office may need to file a Form MU4. Please consult the applicable *jurisdiction(s)* to verify the requirements there. *Required in Idaho as of 1/1/2006.*
3. **JURISDICTION-SPECIFIC REQUIREMENTS** – Consult each *jurisdiction* in which the *applicant* is applying for a list of requirements unique to the *jurisdiction(s)*, including applicable fees, records retention, branch-related bonding, etc.

C. EXPLANATION OF TERMS – The following terms are italicized throughout Form MU3

APPLICANT – The mortgage lender or mortgage broker applying on or amending information on this form for a branch license/registration. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

JURISDICTION – A state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

FINANCIAL SERVICES OR FINANCIAL SERVICES-RELATED – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to, acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, closing agent, title company, or escrow agent.

PERSON – An individual, partnership, corporation, trust, or other organization.

FORM MU3 (Branch)	UNIFORM MORTGAGE BRANCH OFFICE FORM		MORTGAGE BROKER <input type="checkbox"/> MORTGAGE LENDER <input type="checkbox"/> MORTGAGE SERVICER <input type="checkbox"/>
	<i>Applicant</i> full legal name: _____ Date of Filing: _____ Effective Date: _____		
<u>WARNING:</u> Failure to keep this form current and to file accurate supplementary information on a timely basis, or the failure to keep accurate books and records or otherwise to comply with the provisions of law pertaining to the conduct of business for which you are applying, may violate the laws of the <i>jurisdictions</i> and may result in disciplinary, administrative, injunctive or criminal action.			
1.	NEW BRANCH APPLICATION <input type="checkbox"/>	SURRENDER <input type="checkbox"/>	AMENDMENT <input type="checkbox"/> <i>Complete only the item(s) being amended.</i>
2.	_____ Physical address (Number and Street) _____ Physical City, State/Country, Zip+4/Postal Code	2a.	_____ NEW Physical address (Number and Street) _____ NEW Physical City, State/Country, Zip+4/Postal Code
3.	_____ Mailing address or P.O. Box (if applicable) _____ Mailing address City, State/Country, Zip+4/Postal Code	3a.	_____ NEW Mailing address or P.O. Box (if applicable) _____ NEW Mailing address City, State/Country, Zip+4/Postal Code
4.	_____ Business (Area Code) and Telephone Number _____ Fax (Area Code) and Number _____ Branch e-mail _____ Branch website	4a.	_____ NEW Business (Area Code) and Telephone Number _____ NEW Fax (Area Code) and Number _____ NEW Branch e-mail _____ NEW Branch website
5.	_____ Trade name or "dba" used at this branch	5a.	_____ NEW Trade name or "dba" used at this branch
6.	_____ Branch Manager Name _____ Supervisor Name	6a.	_____ NEW Branch Manager Name _____ NEW Supervisor Name
EXECUTION: The undersigned, being first duly sworn, deposes and says that he/she is an officer of the <i>applicant</i> and has executed this form on behalf of, and with the authority of, said <i>applicant</i> . The undersigned and <i>applicant</i> represent that the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete. The undersigned and <i>applicant</i> further represent that to the extent any information previously submitted is not amended such information is currently accurate and complete.			
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> Date (MM/DD/YYYY) _____ Subscribed & Sworn before me _____ Notary seal here </div> <div style="width: 40%;"> Signature of authorized party _____ Print Notary Public name _____ on this _____ day of _____, _____ at _____ Month Year State County </div> <div style="width: 30%;"> Title _____ Print authorized party name _____ Notary Appointment Expires (MM/DD/YYYY) _____ </div> </div>			
<i>This execution must always be completed in full with original, manual signature and notarization. Affix notary stamp or seal where applicable.</i>			

Applicant full legal name: _____

7.	Physical address of location where the official books and records generated by this branch office will be kept. Check each <i>jurisdiction</i> for specific records retention requirements.									
	Organization Name (if different from <i>applicant</i>) or Records Custodian Name					Area Code		Telephone Number		
	Number and Street		City		State		Country		Zip+4/Postal Code	
8	Enter appropriate number in the box(es) for each <i>jurisdiction</i> by location: Enter "1" if <i>applicant</i> is newly applying in that <i>jurisdiction</i> as a mortgage branch office. Enter "2" if <i>applicant</i> has a pending application in that <i>jurisdiction</i> as a mortgage branch office. Enter "3" if <i>applicant</i> is already licensed/registered in that <i>jurisdiction</i> as a mortgage branch office.									
Alabama		Georgia		Maryland		New Mexico		South Dakota		
Alaska		Guam		Massachusetts		New York		Tennessee		
Arizona		Hawaii		Michigan		North Carolina		Texas – OCCC		
Arkansas		Idaho		Minnesota		North Dakota		Texas – SML		
California – DOC		Illinois		Mississippi		Ohio		Utah		
California – DRE		Indiana		Missouri		Oklahoma		Vermont		
Colorado		Iowa		Montana		Oregon		Virginia		
Connecticut		Kansas		Nebraska		Pennsylvania		Washington		
Delaware		Kentucky		Nevada		Puerto Rico		West Virginia		
District of Columbia		Louisiana		New Hampshire		Rhode Island		Wisconsin		
Florida		Maine		New Jersey		South Carolina		Wyoming		
9.	Will this branch office and/or individuals at this branch office operate pursuant to a written agreement or contract with the <i>applicant's</i> main office? If "yes" provide a copy(ies) of the agreement(s)/contract(s).								YES <input type="checkbox"/>	NO <input type="checkbox"/>
10.	Will this branch office have sole responsibility for decisions relating to individuals originating or soliciting mortgage loans: (a) with respect to employment? (b) with respect to compensation?								YES <input type="checkbox"/>	NO <input type="checkbox"/>
11.	Does any <i>person</i> , other than the <i>applicant</i> , have responsibility, directly or indirectly, for paying the expenses of this branch office or otherwise have a financial interest in this branch office or its activities? (a) If yes, provide an explanation of the expense payment and/or financial interest arrangement: _____ (b) If yes, provide the following information for each <i>person</i> responsible for the expenses or with a financial interest:								YES <input type="checkbox"/>	NO <input type="checkbox"/>
FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)		Address, City, ST, Zip			Telephone		SSN, IRS Tax No. or Employer ID		Separately Licensed? YES NO	
									<input type="checkbox"/> <input type="checkbox"/>	
									<input type="checkbox"/> <input type="checkbox"/>	
									<input type="checkbox"/> <input type="checkbox"/>	
									<input type="checkbox"/> <input type="checkbox"/>	
									<input type="checkbox"/> <input type="checkbox"/>	
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									<input type="checkbox"/> <input type="checkbox"/>	
									<input type="checkbox"/> <input type="checkbox"/>	
									<input type="checkbox"/> <input type="checkbox"/>	

JAMES E. RISCH
GOVERNOR

GAVIN M. GEE
DIRECTOR

STATE OF IDAHO
DEPARTMENT OF FINANCE
700 W. STATE STREET, 2nd FLOOR – BOISE ID 83702
P O BOX 83720 - BOISE ID 83720-0031
TELEPHONE: (208) 332-8002
FAX: (208) 332-8096
<http://finance.idaho.gov>



IDAHO ADDENDUM

Jurisdiction-Specific Requirements for the State of Idaho
Form MU3 Uniform Mortgage Broker/Lender License Branch Application

The following items must be included with any submission for a mortgage broker/lender branch office license in addition to the requirements of the uniform application form. The “Home/Main/Corporate” location must be licensed prior to any branch. Each additional branch location desiring to conduct business in Idaho must be separately licensed and will require a separate filing of an MU3 application form with appropriate fees and bond. Each branch must be a true extension of the legal entity licensed as the “home/main/corporate” office and not under separate ownership, contract or control such as a franchise or “net” branch.

1. **Qualified Person in Charge (QPIC):** This person must demonstrate a minimum of three (3) years’ experience specifically in residential mortgage brokering/lending. Idaho Code § 26-3108(2)(b). This person does not have to be an owner, officer, member, partner or director. **The Form MU2 must be completed and provided for each designated QPIC.** A resume must also be submitted and it must contain names, addresses, dates (mo/yr) of employment and **detailed job descriptions/duties** for all employers. Job titles alone are NOT sufficient.

Name of Qualified Person in Charge

Business Address

Phone

Fax

email

The QPIC must obtain a mortgage loan originator license if he/she conducts or will conduct mortgage loan origination activities in Idaho. If not, this person is still required to obtain continuing education in accordance with IDAPA 12.01.10 (10).

2. **Evidence of filing with the Idaho Secretary of State’s office:** If a “d/b/a” or “fictitious” business name will be used in Idaho that is not already of record associated with the “home/main/corporate” office license, a file-stamped copy of the Certificate of Assumed Business Name will also be required. Contact (208) 334-2300 or www.idsos.state.id.us for further information and filing requirements.
3. **Application Fee:** \$350.00 payable to the Idaho Department of Finance for each branch application. There are no fees charged for amendments such as name or address changes, additions/subtractions of d/b/a’s, or corrections.
4. **Surety Bond or Certificate of Deposit:** Bond or CD must be in the amount of \$10,000 for each additional branch location. There is no maximum cap. The *original* bond or CD must be provided to this office. The bond must be fully executed by both the surety company and applicant. Subsequent increases to the bond may be in the form of a fully executed rider. A CD must be payable to the Idaho Department of Finance, with interest payable to the applicant entity. A CD must remain in place for a period of three (3) years after cessation of Idaho licensure. Instructions for a CD in lieu of surety bond are available on the Department’s website at <http://finance.idaho.gov> in the “loan originator and mortgage forms” section. **NOTE: The name of the principal insured on the bond/CD must match EXACTLY to name shown in section 1A of the Form MU1 and the entity filing with the Idaho Secretary of State.**
5. **Mortgage Loan Originators:** Individuals desiring to conduct mortgage loan origination activity in Idaho as defined in Idaho Code § 26-3102(20), regardless of title or position, must be licensed prior to commencing origination activity unless exempt under Idaho Code § 26-3103. File Form MU4, with appropriate fee and bond, for each individual.



Check this box if you intend to fund, either through a warehouse line or other entity-owned funds, subordinate lien financing (i.e. second mortgages, equity lines, etc), or undertake the assignment and direct collection of payments and enforcement of rights of such subordinate lien loans. If marked, this application will also serve as the application for the Idaho Regulated Lenders License and will subject the applicant to the provisions of the Idaho Credit Code, its renewals and reporting requirements.

Please submit all items simultaneously. All approved licensees are posted to the Department's website daily.

YOU ARE NOT AUTHORIZED TO ENGAGE IN MORTGAGE BROKERING OR MORTGAGE LENDING ACTIVITIES IN IDAHO UNTIL YOU HAVE RECEIVED A LICENSE AS AN ENTITY FOR THE SPECIFIC LOCATION AND NO LOAN ORIGINATOR IS AUTHORIZED TO ENGAGE IN MORTGAGE LOAN ORIGINATION ACTIVITIES UNTIL HE/SHE HAS RECEIVED A LICENSE OR PROVIDED EVIDENCE OF EXEMPTION.

Return this Addendum with your application package.